PTO/SB/22 (10-00)
Approved for use through 10/31/2002. OMB 0651-0031
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| a TRACE | are required to respond to a collection of information uni | | | | | | |
|--|--|------------------------------------|---------------------------|--|--|--|--|
| PETITION FOR EXTENSION OF 1 | | Docket Number (Optional) Tomassi-3 | | | | | |
| | In re Application of Tomassi | | | | | | |
| | Application Number 10/764,917 | | Filed 1/16/2004 | | | | |
| | For Vending System Having Biometric Verification | | | | | | |
| | Group Art Unit 3651 | | Examiner G.O. Crawford | | | | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | | | | |
| The requested extension and appropriate (check time period desired): | non-small-entity fee are as follows | | | | | | |
| X One month (37 CFR 1.17(a) | | <u>\$_120</u> | | | | | |
| Two months (37 CFR 1.17(a |)(2)) | | \$ | | | | |
| Three months (37 CFR 1.17(a)(3)) | | | \$ | | | | |
| Four months (37 CFR 1.17(a | u)(4)) | | \$ | | | | |
| Five months (37 CFR 1.17(a |)(5)) | | a | | | | |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$\frac{60}{\text{X}}\$ A check in the amount of the fee is enclosed. | | | | | | | |
| Payment by credit card. Form PTC | 0-2038 is attached. | | | | | | |
| The Commissioner has already been authorized to charge fees in this | | | | | | | |
| application to a Deposit Account. The Commissioner is hereby author | prized to charge any fees which may be | required, | | | | | |
| or credit any overpayment, to Depo | osit Account Number _50-1954 | · | | | | | |
| I am the applicant/inventor | | | | | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | | | |
| X attorney or agent of record. | | | | | | | |
| attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) | | | | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | |
| | | | | | | | |
| 05/03/2005 | 66 | Ź | | | | | |
| Date | Signa | ture | | | | | |
| HGUTEMA1 00000029 10764917 | Eric A. LaMorte | | | | | | |
| 60.00 0P Typed or printed name | | | | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | | |
| Total offorms are submitted | | | | | | | |

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

05/10/2005 01 FC:2251

PTO/SB/17 (10-04v2)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 2005

(\$) 60

Effective 10/01/2004. Patent fees are subject to annual revision.

✓ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

| Complete if Known | | | | |
|----------------------|---------------|--|--|--|
| Application Number | 10/764,917 | | | |
| Filing Date | 01/26/2004 | | | |
| First Named Inventor | Tomassi | | | |
| Examiner Name | G.O. Crawford | | | |
| Art Unit | 3651 | | | |
| Attorney Docket No. | Tomassi-3 | | | |

| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | | | | | | |
|--|-------------------------------|-----------------------------|-------------|--------|---|----------|--|--|
| Check Credit card Money Other None | Other None 3. ADDITIONAL FEES | | | | | | | |
| Deposit Account: | <u>Large</u> | Entity | Smail | Entity | ! | | | |
| Donosit | Fee Code | Fee (\$) | Fee Code | Fee | Fee Description | For Date | | |
| Account Number | 1051 | 130 | 2051 | | Surcharge - late filing fee or oath | Fee Paid | | |
| Deposit Lamorto 9 Approintes | 1052 | 50 | 2052 | | Surcharge - late provisional filing fee or | | | |
| Account Name Lamorte & Associates | | | | | cover sheet | | | |
| The Director is authorized to: (check all that apply) | | 130 | 1053 | | Non-English specification | | | |
| Charge fee(s) indicated below Credit any overpayments | | 2,520 | 1812 | -, | For filing a request for ex parte reexamination | | | |
| Charge any additional fee(s) or any underpayment of fee(s) | | 920* | 1804 | 920- | Requesting publication of SIR prior to Examiner action | | | |
| Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | | | |
| FEE CALCULATION | | 110 | 2251 | 55 | Extension for reply within first month | 60 | | |
| 1. BASIC FILING FEE | 1252 | 430 | 2252 | 215 | Extension for reply within second month | | | |
| Large Entity Small Entity | 1253 | 980 | 2253 | 490 | Extension for reply within third month | | | |
| Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$) | 1254 | 1,530 | 2254 | 765 | Extension for reply within fourth month | | | |
| 1001 790 2001 395 Utility filing fee | 1255 | 2,080 | 2255 | 1,040 | Extension for reply within fifth month | | | |
| 1002 350 2002 175 Design filing fee | 1401 | 340 | 2401 | 170 | Notice of Appeal | | | |
| 1003 550 2003 275 Plant filing fee . | 1402 | 340 | 2402 | 170 | Filing a brief in support of an appeal | | | |
| 1004 790 2004 395 Reissue filing fee | 1403 | 300 | 2403 | 150 | Request for oral hearing | | | |
| 1005 160 2005 80 Provisional filing fee | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | | | |
| SUBTOTAL (1) (\$) | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | | | |
| | 1453 | 1,370 | 2453 | 685 | Petition to revive - unintentional | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | 1501 | 1,370 | 2501 | 685 | Utility issue fee (or reissue) | | | |
| Extra Claims below Fee Paid | 1502 | 490 | 2502 | 245 | Design issue fee | | | |
| Total Claims | 1503 | 660 | 2503 | | Plant issue fee | i | | |
| Claims X = X = X Multiple Dependent | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | | | |
| | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | | | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | | | |
| Code (\$) Code (\$) | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | | | |
| 1202 18 2202 9 Claims in excess of 20 | 1809 | 790 | 2809 | 395 | Filing a submission after final rejection | | | |
| 1201 88 2201 44 Independent claims in excess of 3 | | | | | (37 CFR 1.129(a)) | | | |
| 1203 300 2203 150 Multiple dependent claim, if not paid | 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR 1.129(b)) | | | |
| 1204 88 2204 44 ** Reissue independent claims over original patent | 1801 | 790 | 2801 | 395 | Request for Continued Examination (RCE) | | | |
| 1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | | | |
| SUBTOTAL (2) (\$) | 1 | | | | e and 5 copies | | | |
| **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if | | | | | | | | |
| SUBMITTED BY (Complete (if applicable)) | | | | | | | | |

Registration No. Telephone 215 321-6772 34653 Eric LaMorte Name (Print/Type) Date 05/03/2005 Signature

> WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.